2021 Annual Report

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Fairfax, VA 22031-1931
Dear Friends:

Fortune smiled on the Brain Injury Association of America (BIAA) in 2021. Despite the continued threat of COVID-19, the Association expanded its programs and services to reach the millions of individuals who sustain brain injuries each year and their families or caregivers, as well as the clinicians, researchers, and professionals who serve our constituents.

BIAA staff personally assisted more than 4,000 individuals with brain injury and/or their families through our National Brain Injury Information Center (NBIIC) while our affiliates responded to around 20,000 requests for help nationwide.

The Association’s Academy of Certified Brain Injury Specialists (ACBIS) staff processed more than 1,500 applications from licensed clinicians and direct support professionals who voluntarily sought the brain injury specialist credential. There are now more than 6,500 ACBIS certificants in the U.S. and abroad.

BIAA’s Brain Injury Research Fund awarded four grants to study (1) the impact of traumatic brain injury on opioid use disorder, (2) whether or not transcranial photobiomodulation can improve cognitive function, (3) the neuroimmune response after injury, and (4) the utility and benefit of new mobile technologies to assess pain after injury.

This year, there were fewer brain injury-specific legislative victories than in years past, due largely to policymakers’ continued focus on the coronavirus, but BIAA delivered an extensive repertoire of educational programs via webinars and on-demand technologies.

BIAA also managed a robust communications program, welcoming nearly one million visitors to our website and connecting with 50,000 social media friends and followers. We also forged a new partnership with Abbott Laboratories to build awareness and understanding of concussion at the end of 2021.

Finally, an extraordinarily generous bequest from the estate of Mark W. Davis is worthy of special mention because it strengthened all of our programs and services. On behalf of the Board of Directors and staff, I am pleased to present BIAA’s Annual Report for 2021.

Susan H. Connors, President/CEO
Brain Injury Association of America
National Brain Injury Information Center

BIAA established the National Brain Injury Information Center (NBIIC) to assist individuals and families who experience the life-changing, sometimes devastating, effects of brain injury. Callers who dial 1-800-444-6443 speak to compassionate, knowledgeable specialists who assist in locating rehabilitative, legal, financial, and other support services critical to maximizing recovery.

The Association works in collaboration with its chartered state affiliates to offer NBIIC services in all 50 states and the District of Columbia.

In 2021, BIAA took 4,001 calls, which is a 14% increase from 2020. We talked with people who sustained their injuries from a wide range of causes, ranging from motor vehicle accidents to anoxic injuries and other non-traumatic causes. Most callers found out about NBIIC through the BIAA website, however social media referrals increased from 124 in 2020 to 177 in 2021, which is an increase of 30%.

2021 NBIIC Requests
Information about Caregiver Family Coping and Cognition continue to be topics most requested by our callers. This data reinforces BIAA’s recognition of brain injury as a chronic condition, emphasizing the value in making information, resources, and support available throughout the lifespan.
Advocacy

The Brain Injury Association of America (BIAA) reinforced its position as the voice of brain injury for Congress and the administration by tackling legislative and regulatory priorities vital to the brain injury community amid the coronavirus pandemic.

During the year, BIAA advocated for the inclusion of the Home and Community Based Services Relief Act as part of the supplemental funding bills for COVID. Similarly, BIAA urged policymakers to include supplemental funding for the Individuals with Disabilities Education Act (IDEA).

BIAA pressed the Centers for Medicare and Medicaid (CMS) to loosen its rules during the public health emergency, calling for special enrollment periods for Medicare beneficiaries, greater availability of telehealth and telerehabilitation services, and elimination of restrictive admission requirements for inpatient rehabilitation facilities (IRF). BIAA also urged CMS to withdraw case review proposals that could harm patients treated in IRFs and instead work with stakeholders to achieve fraud protection goals. Similarly, BIAA pushed CMS to streamline prior authorization protocols in Medicare Advantage plans.

In the strongest possible terms, BIAA urged CMS to recognize the needs of patients with cognitive impairments as the agency contemplates a unified post-acute care payment system that would essentially pay inpatient rehabilitation, skilled nursing, and home health services at the same rate although the costs of delivering services in these sites differs widely.

In 2021, BIAA also worked hard on appropriations. The Association joined with hundreds of state and national organizations House and Senate leaders to allocate $50 million in gun violence research and prevention split between the National Institutes of Health and the Centers for Disease Control and Prevention (CDC). We also fought for full funding of a concussion surveillance system at CDC as authorized under TBI Reauthorization Act of 2018.

As BIAA does each year, we supported House and Senate Fiscal Year 2022 Labor, Health and Human Services, Education, and Related Agencies appropriations bill, which recommend funding increases for the State TBI Partnership Program and TBI Protection & Advocacy Program and the TBI Model Systems of Excellence housed with the administration on Community Living (ACL).
Also within the Health and Human Services Department (HHS), BIAA advocated for a $14.2 million appropriation for the Lifespan Respite Care Program. The Association also lobbied for a $400 billion allocation for Medicaid home and community-based services (HCBS) funding as part of the budget reconciliation plan. BIAA pushed for an extension of the 3.75% payment adjustment for therapeutic services in the 2022 Physician Fee Schedule and urged Congress to establish a permanent fix to avoid care disruptions.

The final appropriations bill BIAA supported addressed Military Construction, Veterans Affairs, and Related Agencies. In 2021, the bill included language to support Neurology Centers of Excellence within the Veteran’s Health Administration. These health centers would serve persons with epilepsy, seizures, and head pain in connection with traumatic brain injuries.

The Association supported a number of smaller bills of interest to all persons with disabilities, including individuals with brain injuries. These included:

- The Supplemental Security Income Restoration Act to increase the benefit rate to at least 100% of the Federal Poverty Level, adjusted annually, and end the marriage penalty.
- The Direct CARE Opportunity Act to providing $1 billion in grants to states and other eligible entities to support innovative projects and programs focused on recruitment, retention, and training for direct care workers and family caregivers.
- The Safe Equitable Campus Resources and Education Act (SECuRE) Act to address the needs of individuals with disabilities on college campuses.
- The Pell Grant for Students with Disabilities Act to allow Pell Grant course credit and semesters requirements waivers for students with disabilities requiring accommodations.
- Supported the Better Care Better Jobs Act, the $400 billion Home- and Community-Based Services bill introduced by Sen. Bob Casey (D-PA) and Rep. Debbie Dingell (D-MI).

Throughout the year, BIAA continued its service on the U.S. Department of Transportation’s Air Ambulance and Patient Billing Advisory Committee to address surprise billing practices. BIAA also maintained steering committee roles in the Coalition to Preserve Rehabilitation and the Disability and Rehabilitation Research Coalition and served on the advisory boards of Chronic Effects of Neurotrauma Consortium and TBI Model Systems National Data Center.
Public Awareness

BIAA revealed its new, survivor-focused awareness campaign for 2021 through a special announcement on Instagram. The More Than My Brain Injury campaign aims to increase understanding of brain injury as a chronic condition, reduce stigma associated with having a brain injury, showcase the diversity of the brain injury community, and improve care and support for individuals and families. The campaign includes customizable social media graphics, pre-made public service announcements, live social media events, merchandise, and more.

In 2021, BIAA partnered with TeachAids and the National Council of Youth Sports (NCYS) to create the CrashCourse Concussion Story Wall. This project features an interactive database of 700 individuals’ stories relating to their experience with concussion. The Story Wall is a comprehensive resource to help personalize and provide insight into the variety of ways individuals sustain, are impacted by, and cope with concussion.

BIAA’s social media reach continued to increase in 2021. BIAA participated in several online awareness campaigns including Falls Prevention Awareness Month, Domestic Violence Awareness Month, Stroke Awareness Month, and National Concussion Awareness Day.

In 2021, more than 40,000 copies of BIAA’s quarterly magazine, THE Challenge!, were distributed in print and online at www.biausa.org. Issues focused on cognition, health challenges, research, and life after brain injury.
**Education, Research, and Support Services**

*Brain Injury Business Practice College*

The 2021 **BIAA Brain Injury Business Practice College** was held virtually on February 3-5.

The college is presented annually for business owners, c-level executives, and marketing professionals from the nation’s top brain injury rehabilitation programs and long-term care facilities.

Presenters included: Mark Mac Aleese, MBA, M.S., FACHE; Rebecca Brashler, LCSW; Debra Braunling-McMorrow, Ph.D.; Scott Burgmeyer; Michael Choo, M.D.; Susan Conners; Nicole Curzydlo, CTRS, CBIS, ATRIC; Julie Dromgoole, OTR/L; Kyle Fahey, PT, DPT; James Malec, Ph.D., ABPP-CN, Rp FAPA, FACRM, CSO; Ann Marie McLaughlin, Ph.D.; Tammy Miller, COTA/L, MHS, CBIST, CCM; Tom Murphy; Joseph Nahra; Gary Seale, Ph.D.; Peter Thomas, J.D.; and Joe Walters.

Sessions included an exploration of federal legislation and regulations relating to brain injury rehabilitation; an overview of Quality Operating Systems; a look at how COVID-19 changed medical practice in rehabilitation settings; strategies for implementing lean principles in brain injury rehabilitation; a review of the history and goals of the Foundation to Advance Brain Rehabilitation; an overview of telehealth during COVID-19 and beyond; an interactive case study on defining excellence for post-acute residential programs; and a group discussion on lessons learned from COVID-19.
Academy of Certified Brain Injury Specialists (ACBIS)

The ACBIS program has been a cornerstone of the Association’s professional education since 1996. BIAA processed more than 1,350 applications in 2021, expanding the certification to more than 8,000 specialists in the United States and other countries, and issued 247 certificates of completion to paraprofessionals and family members who attended Brain Injury Fundamentals trainings.

BIAA is grateful to the professionals who volunteer their expertise to maintain and enhance the quality of ACBIS education and the rigor of the certification process through the ACBIS Board of Governors. The Board of Governors has worked diligently over the years to build, expand, and regularly improve education and certification options for those working in the field of brain injury.

2021 ACBIS Board of Governors

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Webinars

BIAA’s webinar series helps individuals including caregivers, medical professionals, and brain injury survivors learn through our educational programs.

In 2021, BIAA offered six webinar series:

Butch Alterman Memorial Series
- **COVID-19 Vaccination for Individuals with TBI**, Gregory J. O’Shanick, M.D.
- **Sleep and Brain Injury**, Kathleen Bell, M.D.

Business of Brain Injury Series
- **Conveying a Compelling Value Proposition for Payers**, Emily Barlow, MBA
- **Minimum Competency Recommendations for Programs that Provide Rehabilitation Services for Persons with Disorders of Consciousness**, Flora Hammond, M.D., FACRM, FAAPMR and Alan Weintraub, M.D., FACRM

Carolyn Rocchio Caregiver Series
- **Brain Injury, Aging, and Planning for the Future**, Christine Weaver, MAS, OTR/L, CLCP, CBIS, C/NDT
- **Managing Finances after Brain Injury**, Heather Eldridge, OT
- **Understanding and Managing Spasticity After Brain Injury**, Laura Wiggs, PT, NCS, CBIS
- **Recreation and Social Opportunities After Brain Injury**, Joanne Finegan, MSA, CTRS, FDRT

Mitch Rosenthal Memorial Lecture Series
- **Concussion Symptom Treatment and Education Program for Children and Adolescents: A Feasibility Study**, Tess S. Simpson, Ph.D. and Kelly A. McNally, Ph.D., ABPP-CN
- **Psychosocial and Functional Predictors of Depression and Anxiety Symptoms in Veterans and Service Members with TBI**, Jacob A. Finn, Ph.D., LP
- **Traumatic Brain Injury and the Opioid Epidemic: A Perfect Storm**, Rachel Sayko Adams, Ph.D., MPH
- **Why Understanding Partner-Related Brain Injuries is More Critical than Ever: COVID-19 and its Mitigation Strategies**, Eve M. Valera, Ph.D.
David Strauss Memorial Lecture Series

- Clinical Assessment and Management of Spasticity Following Brain Injury, Cindy Ivanhoe, M.D.
- Emergency Air Medical’s Role in Rural America and Challenges to Preserving Access, Stephanie Queen
- Traumatic Brain Injury, Strangulation, Domestic Violence and Culture: What’s the Link?, Monique R. Pappadis, MEd, Ph.D., Rachel Ramirez, MA, MSW, LISW-S, RA, and Leila Wood, Ph.D., MSSW
- Use of Applied Behavior Analysis In Brain Injury Treatment – Function-Based Treatment and Outcomes, Anneka Hofschneider, MA, BCBA, CBIS, Chris H. Persel, M.A., CCM, CBIS, CPHM
- Use of Applied Behavior Analysis In Brain Injury Treatment – Training, Ethics and Goals, Considerations for Success, Anneka Hofschneider, MA, BCBA, CBIS, Chris H. Persel, M.A., CCM, CBIS, CPHM
- Representing Clients With Traumatic Brain Injuries: Ethical Dilemmas and Settlement Considerations, Shana De Caro, Esq., Lana O’Brien, Esq., and Joan Lensky Robert, Esq.

Robert Sbordone Memorial Lecture on mTBI/Concussion Series

- The Cutting Edge of Mild Traumatic Brain Injury: Providing an Objective Assessment to Brain Injury Evaluation Using Biomarkers, Jesse Pines, M.D., Jeffrey Bazarian, M.D., MPH and Paul Jarvis, M.D.
- The Intersection of Concussion and Athlete Brain Health, Jeffrey Kutcher, M.D., FAAN
- Post-Concussion Care: Elevating the Patient-centered Focus, Jessica Schwartz, PT, DPT, CSCS
- Vision Problems in Concussion, Jaqueline Theis, OD, FAAO
Research

BIAA continued its collaboration with the Brain Injury Research Center at the Icahn School of Medicine at Mount Sinai to develop and disseminate “Guidelines for the Rehabilitation and Disease Management of Adults with Moderate to Severe Traumatic Brain Injury TBI.” The goal of this research project is to identify how much rehabilitation adult patients with moderate to severe TBI should receive and what setting and at what point after injury achieves the best results. This project is funded by BIAA through generous donations.

Expert panelists are reviewing literature in five areas: behavioral, cognitive, functional, medical, and vocational/participation rehabilitation. Researchers, originally expected to complete the guidelines and recommendations in 2017, have encountered vastly more literature than expected and the end date has been tentatively set for December 2021.

Leaders of the project include Wayne A. Gordon, Ph.D., ABPP/Cn, Marcel Dijkers, Ph.D., Jennifer Bogner, Ph.D., ABPP, FACRM; Keith Cicerone, Ph.D., ABPP-Cn; Kristen Dams-O’Connor, Ph.D.; Steven R. Flanagan, M.D.; Stephanie Kolakowsky-Hayner, Ph.D., CBIST, FACRM; and Angela Yi, Ph.D.

Brain Injury Research Fund

To further support research, BIAA held a grant competition with funding from its Brain Injury Research Fund.

The goal of the grant program is “Finding Cures for Chronic Brain Injury,” with research priorities for the 2021 competition in five areas:

- Chronic brain injury (CBI) can cause neurodegenerative diseases, such as Parkinson’s disease, Lewy Body Dementia, Chronic Traumatic Encephalopathy, and possibly multiple sclerosis and Alzheimer’s disease. Typically, there is a marked delay from injury to disease onset. What neurological processes are triggered by brain injury that cause these chronic, progressive diseases, and how can the progression from injury to neurological disease be halted?

- Childhood traumatic brain injury (TBI), even when mild, is associated with adult problems of behavioral regulation, (e.g., addiction, criminal behavior, socially inappropriate behavior). Is this relationship causal or does TBI mediate other bio/psycho/social processes? What factors create the risk of adult consequences from childhood TBI and how can that risk be diminished?
• Moderate and severe TBI reduces life expectancy by nine years. Even after living to one-year post injury, persons with this severity of injury are 50% more likely to die than age-, sex-, and race/ethnicity-matched members of the general population. Causes of death involve all organ systems, not just those associated with behavioral or neurological pathology. What biological processes are responsible for this excess mortality and how can these relationships be ameliorated?

• Brain injury is recognized as a chronic health condition that, for some, requires proactive medical management. More research is required to inform evidence-based disease management protocols, including studies addressing these questions:
  
  o Which brain injuries increase risk for negative outcomes?
  o What pre-existing conditions require management?
  o What conditions develop post injury that could be prevented or detected early?
  o How can the individual participate in their self-management?
  o How can access to medical and rehabilitation care be used to reduce negative outcomes?
  o How can community-based resources be accessed to improve function and reduce institutionalization?

• Disability is a product of both impairments in brain function and environmental factors that create barriers to health and independence. What community characteristics exacerbate or minimize the manifestation of impairments due to brain injury? How do social determinants of health affect brain injury outcomes? What community interventions are effective in ameliorating the influence of environmental factors on brain injury outcomes?

In support of these goals and research priorities, the following grants were offered:
  • Dissertation Grants of up to $5,000
  • Young Investigator Seed Grants of up to $25,000
  • Brain Injury Scholar Seed Grants of up to $25,000

The BIAA Research Committee, chaired by Dr. John Corrigan, reviewed numerous Letters of Interest and invited specific applicants to submit a full proposal. From those proposals, the following projects were selected to receive funding:

“Complement Mediated Cognitive Decline and Neuroinflammation Chronically Post Repetitive Brain Injury”
Seed Grant of $25,000
Grantee: Khalil Mallah, Ph.D., Medical University of South Carolina
“Using Mobile Technologies for Research Engaging Persons with Traumatic Brain Injury and Chronic Pain”
Seed Grant of $24,977.70
Grantee: Michael W. Williams, Ph.D., University of Houston

“Neurocognitive Effects of Transcranial Photobiomodulation in Chronic TBI”
Dissertation Grant of $5,000
Grantee: Naomi Gaggi, CUNY School of Medicine

“The Implications, Magnitude, and Development of TBI for Individuals Undergoing Treatment for OUD”
Dissertation Grant of $3,675 supported by Dr. Lance and Laura Trexler
Grantee: Hannah Mitchell, East Tennessee State University

Brain Injury Research Fund Honor Roll
Our thanks to the following Research Champions for their generous support of brain injury research:

Dr. Barry Aron  
Chaikin, Sherman, Cammarata and Siegel, P.C.  
Dr. Julieen Crane  
Jennifer and Eric Kirk  
Stephanie Rivard Lane  
Dr. and Mrs. Brent Masel  
Michael’s Mission in memory of Michael Leo Seguin

Dr. Linda Redmann  
John Rivard  
Ira Sherman, Esq.  
Dr. Lance and Laura Trexler  
Angela Caveness Weisskopf
Chartered State Affiliates

The Brain Injury Association of America’s chartered state affiliates provide local and statewide help, hope, and healing to millions of constituents through programs and services, education, prevention and awareness initiatives, and support groups. BIAA held its 26th Annual Affiliate Leadership Conference virtually Oct. 25-27, 2021.

BIAA affiliate leaders came together to discuss and focus on innovative strategies to strengthen governance and fundraising acumen.

Association award winners included:

**2021 Award of Excellence for Programs & Services**
- Brain Injury Association of Massachusetts
- Brain Injury Association of Virginia
- Brain Injury Association of Pennsylvania

**2021 Award of Excellence for Fundraising**
- Brain Injury Association of South Carolina

**2021 Chief Volunteer Officer of the Year**
- Sherry Caldwell, President, Brain Injury Association of South Carolina
Vision

Everyone in the U.S. who sustains a brain injury is diagnosed, treated, and accepted.

Mission

Our mission is to advance awareness, research, treatment, and education that improves the quality of life for all people affected by brain injury.

Values

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<tr>
<th>Leadership</th>
<th>We stand up for what we believe in.</th>
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<tr>
<td>Integrity</td>
<td>We tell the truth and keep our promise.</td>
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<td>Respect</td>
<td>We treat others the way we want to be treated.</td>
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<tr>
<td>Diligence</td>
<td>We work hard every day.</td>
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<tr>
<td>Strategy</td>
<td>We think before we act.</td>
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<tr>
<td>Growth</td>
<td>We aspire to do more and be more.</td>
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Special Tree
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The Brain Injury Association of America's Preferred Attorneys have demonstrated their knowledge of the physical, cognitive, emotional, and financial tolls a brain injury can inflict. More information about the Preferred Attorney Program can be found at biausa.org/attorneys.

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Thank you to our recurring donors. Their support helps form a predictable source of income we can count on to fund services for people living with brain injury and their caregivers.

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The Futures Fund Legacy Society
The Futures Fund Legacy Society recognizes donors who have made a provision for BIAA through a planned gift or in their will or estate plan. Legacy gifts make it possible for BIAA to invest in new lines of research and meet the ever-evolving needs of the brain injury community. A special thank you to the following individuals who have made such thoughtful commitment.

Dr. Guillermo Arbona  Dr. Shelly Levy
Mark Lane Brandt  Dr. Brent Masel
Dr. John Corrigan  Mr. Douglas Minturn
Mr. Mark W. Davis  Ms. Rhonda Oetzel
Dr. Christina Dillahunt-Aspillaga  Mr. Reynaldo T. Palacio
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Mrs. Stephanie Rivard Lane
## 2021 Financial Highlights

The figures on this page depict the financial activities of the Brain Injury Association of America for the fiscal year ended December 31, 2021.

<table>
<thead>
<tr>
<th>Statement of Activities</th>
<th>Statement of Financial Position</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PUBLIC SUPPORT AND OTHER REVENUE</strong></td>
<td><strong>ASSETS</strong></td>
</tr>
<tr>
<td>Contributions and Grants</td>
<td>Cash, Cash Equivalents and Investments $3,782,685</td>
</tr>
<tr>
<td>Program Services Revenue</td>
<td>Receivable, Net $214,444</td>
</tr>
<tr>
<td>Other Revenue</td>
<td>Property and Equipment, Net $0</td>
</tr>
<tr>
<td><strong>Total Revenue</strong></td>
<td><strong>Total Assets</strong> $6,594,689</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>EXPENSES</strong></th>
<th><strong>LIABILITIES and NET ASSETS</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Education, Training and Research Services</td>
<td>Accounts Payable &amp; Accrued Expenses $205,583</td>
</tr>
<tr>
<td>Public Awareness and Communications</td>
<td>Deferred Revenue $177,892</td>
</tr>
<tr>
<td>Individual and Family Services</td>
<td>Other Liabilities $0</td>
</tr>
<tr>
<td>Government Relations and Advocacy</td>
<td><strong>Total Liabilities</strong> $383,475</td>
</tr>
<tr>
<td>Affiliate Services</td>
<td>Without Donor Restrictions $4,840,281</td>
</tr>
<tr>
<td>Management and General</td>
<td>With Donor Restrictions $1,370,933</td>
</tr>
<tr>
<td>Fund Raising</td>
<td><strong>Total Net Assets</strong> $6,211,214</td>
</tr>
<tr>
<td><strong>Total Expenses</strong></td>
<td><strong>Total Liabilities and Net Assets</strong> $6,594,689</td>
</tr>
</tbody>
</table>

A complete copy of financial statements audited by UHY, LLP is available upon request from the Brain Injury Association of America, Inc., 3507 Nutley St., #805, Fairfax, VA 22031 or on our website at biausa.org.
Public Support & Other Revenue

- Contributions and Grants: 59%
- Program Services Revenue: 30%
- Other Revenue: 11%

Expenses

- Public Awareness and Communications: 28%
- Individual and Family Services: 10%
- Government Relations and Advocacy: 11%
- Affiliate Services: 26%
- Management and General: 10%
- Fund Raising: 15%